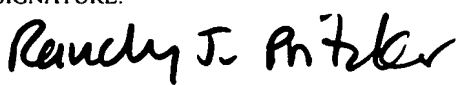


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USE IN LIEU OF PTO-1390 (Rev. 12-2004)
 Approved for use through 3/31/2007. OMB 0651-0021
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| | | | | | |
|--|---------------------|--|-------------|--|----------|
| U.S. APPLICATION NO. (if known, see 37 CFR 1.51) 10/523483 | | INTERNATIONAL APPLICATION NO. PCT/JP2004/007559 | | ATTORNEY'S DOCKET NUMBER S1459.70092US00 | |
| 21. <input checked="" type="checkbox"/> The following fees are submitted: | | | | CALCULATIONS PTO USE ONLY | |
| | | | | | |
| BASIC NATIONAL FEE | | | | | |
| | | | | | |
| Filing Fee (\$300) | | | | \$ | 300.00 |
| Search Fee | | | | \$ | 400.00 |
| Examination Fee (\$200) | | | | \$ | 200.00 |
| Application Size Fee, each additional 50 sheets over 100 sheets (\$250 per page) | | | | \$ | |
| TOTAL FILING FEE = | | | | \$ | 900.00 |
| Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)). | | | | \$ | |
| CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | |
| Total claims | 15 - 20 = | 0 | x \$50.00 | \$ | |
| Independent claims | 6 - 3 = | 3 | x \$200.00 | \$ | 600.00 |
| MULTIPLE DEPENDENT CLAIM(s) (if applicable) | | | + | \$ | |
| TOTAL OF ABOVE CALCULATIONS = | | | | \$ | 1,500.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | | \$ | |
| SUBTOTAL = | | | | \$ | 1,500.00 |
| Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)). | | | | \$ | |
| TOTAL NATIONAL FEE = | | | | \$ | 1,500.00 |
| Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property + | | | | \$ | |
| TOTAL FEES ENCLOSED = | | | | \$ | 1,500.00 |
| | | | | Amount to be refunded: | \$ |
| | | | | Amount to be charged: | \$ |
| <p>a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>1,500.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>23/2825</u> in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>23/2825</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> | | | | | |
| <p>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.</p> | | | | | |
| <p>SEND ALL CORRESPONDENCE TO:</p> <p>Wolf, Greenfield & Sacks, P.C. 600 Atlantic Avenue Boston, Massachusetts 02210-2206 Tel. (617) 646-8000</p> | | | | | |
| | | | | SIGNATURE: | |
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| | | | | NAME: Randy J. Pritzker | |
| CUSTOMER NUMBER: | | | | REGISTRATION NUMBER: | |
| 23628 | | | | 35,986 | |